

Reviewer 1

COMMENTS TO AUTHORS

The article by Yasutaka and colleagues clarified in vivo rotatory knee stability as well as the anterior-posterior stability after ACL reconstruction using BTB autografts, and correlate knee stability to tunnel positions. It suggested that Anterolateral rotatory instability significantly correlated shallow femoral tunnel positions after ACL reconstruction using BTB autografts. Clinical outcomes, rotatory and anterior-posterior stability were overall satisfactory in both techniques, but the trans-tibial technique located femoral tunnels in shallower and higher positions, and tibial tunnels in more posterior positions than the trans-portal technique, thus increased the anterolateral rotation. Anatomic ACL reconstruction with BTB autografts may restore knee function and stability. The conclusion can offer some valuable guidances to the clinical practice. The content is clear and definite, level of structure is logical and accurate. The manuscript is well-written.

⇒ Thank you very much for your review and comments. We have given full consideration to reviewer's comments and revised the manuscript.

1. There are, however, a few minor issues that should be addressed. 1. Is there any statistic difference of the basic information (such as the age, weight, height, etc) in the two groups? Please describe it clearly in the article.

*⇒ The basic information has been added to the manuscript as a new **Table 1**. There were no difference in age, weight, height and preoperative Lysholm scores between the two groups.*

Text change:

A new **Table 1** added.

2. Although recent large cohort studies have reported gender is not a risk factor for knee instability or revision after ACL reconstruction, it is appreciated to add female research so that the conclusion may be more reliable.

⇒ Exactly, adding female data would be ideal. However, we principally do not harvest BTB graft from female patients in our facility. Therefore, it was mentioned in the manuscript as a limitation of this study.

Reviewer 2

COMMENTS TO AUTHORS

The open MRI plus Slocum ATRI test is a good method for quantitative assessment of rotatory stability of the knee. But we need reliable data to evaluate the result.

⇒ Thank you very much for your review and comments. We have given full consideration to reviewer's comments and revised the manuscript.

1. The demographics of two groups were not presented and compared.

*⇒ The demographic data has been added to the manuscript as a new **Table 1**. There were no difference in age, weight, height and preoperative Lysholm scores between the two groups.*

Text change:

A new **Table 1** added.

2. The sample size was not large enough as mentioned in the article.

⇒ Exactly, we could follow up only 40 patients and the sample size was not so large. Therefore, it was mentioned in the manuscript as a limitation of this study.

3. Why didn't you do this research on the patients undergoing ACL reconstruction with hamstrings since the sample size would be larger than that using BPB as implied in your article.

⇒ Thank you for your comments. We had a comparison study of single-bundle vs double-bundle ACL reconstruction using hamstring graft and those data had been already published in a previous article (Am J Sports Med 2011). Therefore, we would like to avoid duplicating hamstrings cases data for 2 papers.

4. There are many language flaws in the article.

*⇒ The English language in our manuscript has been **corrected by native speaker, Dr. Brandon Marshall PhD** in Department of Orthopaedic Surgery, University of Pittsburgh. We had it checked again by him in this revision, but we understand that your editorialists have our full permission to carry out any necessary linguistic adjustments deemed to be required.*

Dear Dr. Qunjun (Trey) Cui
Editor in Chief
World J Orthopedics

Thank you very much for your review our manuscript "Anterolateral rotatory instability in vivo correlates tunnel position after anterior cruciate ligament reconstruction using bone-patellar tendon-bone graft" (31519) for World Journal of Orthopedics.

We have given considerable thought to the editors' comments, checked and revised the manuscript carefully.

(As we could not submit revised files via the journal website, we attached our revised manuscript to this e-mail)

The English language in our manuscript has been edited by native speaker, Dr. Brandon Marshall PhD (University of Pittsburgh).

I and my coauthors are looking forward to your comments.

Sincerely,

Corresponding author

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